

Application for Reimbursement



SC Prosecutors and Public Defenders Public Service Incentive Program

The SC Prosecutors and Public Defenders Public Service Incentive Program was established by the State of South Carolina to attract and retain qualified attorneys in specific public service agencies by reimbursing payments made on outstanding law school loans.

Eligibility Requirements:

Attorneys employed continuously, on a full-time basis, by one of the following agencies for a period of three years or more are eligible to apply:

SC Attorney General's Office

SC Commission on Prosecution Coordination

SC Commission on Indigent Defense

A Judicial Circuit Solicitor's Office

A County or Circuit Public Defender's Office

Reimbursement:

Up to \$40,000 total can be reimbursed on outstanding law school loans per qualified attorney. After three years of continuous service as a full-time attorney, qualifying attorneys may be reimbursed up to \$1,000 for payments made in the prior calendar year. The annual reimbursement amount may increase by up to an additional \$1,000 for each additional year of service not to exceed a maximum annual reimbursement of \$5,000. Reimbursement may not exceed the amount actually paid on outstanding eligible law school loans during the prior calendar year. Reimbursements may be considered as taxable income. All repayments are contingent on total funding by the SC General Assembly; therefore, any change in program funding could necessitate a change in the amount reimbursed for payments made on your law school loans.

Eligible Law School Loans:

Qualified student loans, as defined by the US Internal Revenue Service, which were used for attendance at an accredited law school, are eligible. This includes, but is not limited to, loans made through federal programs such as the Federal Stafford Loan Program and Federal Graduate PLUS program, as well as private educational loans. A private educational loan is defined as a loan provided by a private educational lender that is not made, insured or guaranteed under part B of Title IV of the Higher Education Act of 1965 and is issued by a private educational lender expressly for postsecondary educational expenses. Loans used for the Bar Exam and for Bar Exam preparation and review are **not** eligible.

Application Process:

February 15, 2008: Final deadline for applications to be submitted to the eligible administering agency.

March 15, 2008: Deadline for administering agency to submit completed applications to SC

Student Loan.

April 15, 2008: Approximate date reimbursement checks will be issued to eligible participating

attorneys by SC Student Loan.

Please note that participation in this program does not constitute a contract of employment.

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Section 1: To be completed by the applicant					
Social Security Number	Legal Name				
	(Last)	(Fir	st)	(MI)	
Permanent Mailing Address	Date of Birth (mm/dd/yy)				
Street					
City		State Zip		/	
Home Phone		Work Phone	Email Address		
()		()			
\$ Total dollar amount paid on outstanding law school loans during the prior calendar year. Attach documentation of payments made on your eligible law school loans during the prior calendar year: You should provide					
a financial statement reflecting all payments made during the prior calendar year from the holder(s) of your law school loans.					
☐ Check here if ALL of your loans are held by SC Student Loan. If so, no documentation is required.					
Employing Agency - Indicate the employing agency under which you are currently employed:					
SC Attorney General's Office SC Commission on Prosecution Coordination SC Commission on Indigent Defense					
Umane Judicial Circuit Solicitor's Office Defender's Office Name County or Defender's Office					
I have been employed on a full-time basis by the following agency(ies) for a period of three years or more:					
Employment Agency(ies) Employment Dates (mm/dd/yy) - (mm/dd/yy)					
I certify that the information contained on this Application is true and accurate.					
Signature of Applicant			Date		

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Section 2: To be completed by a representative of the indicated administering agency

I certify that the information provided by the applicant on the Application has been reviewed and is considered to be true and correct.

SC Administering Agency:	
Date Certified:	
Signature:	
Printed Name:	
Title:	
Address:	
Phone Number:	
Total Dollar Amount to Reimburse: \$	

Upon completion of Section 2, submit application to: Accounts Payable, PO Box 21487, Columbia, SC 29221-1487.

